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TRANSMITTAL FORM

(To be used for all correspondence after initial filing)

Application Number	10/614,279	7
Filing Date	July 7, 2003	(
First Named Inventor	Serge F. Fruhauf	
Art Unit	2876	
Examiner Name	Diane I. Lee	
Attorney Docket No.	02-S-104 (850063.599)	

ENCLOSURES (check all that apply)								
Fee Transmittal Fo Fee Attached Amendment/Respondent After Final Affidavits/declar Extension of Time Express Abandonment Express Abandonment Information Disclose Statement; Form Precedent Cited References Certified Copy of Precedent Document(s) Response to Missing under 37 C.F.R. 1.5 Response to Missing Parts/Incomplete A	orm onse aration(s) Request ment sure PTO-1449 Priority ing Parts 52 or 1.53	CLOSURES (check all the Drawing(s) Request for Corrected Fixeceipt Licensing-related Paper Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation, Change of Correspondence Address Declaration Statement under 37 CFi 3.73(b) Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table of	Filing [A C A B Ir A T R P S R C	after Allowance communication to TC appeal Communication to to to and of Appeals and interferences appeal Communication to C (Appeal Notice, Brief, Reply Brief) aroprietary Information status Letter Receipt Postcard Other Enclosure(s) (please dentify below):			
Firm Name See Intellectual Property Law Group PL			Customer Number 30423					
Signature Weni W de D								
Printed Name Dennis M. de Guzman								
Date Jui	ine 13, 2005	F	Reg. No.		41,702			
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This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

EXPRESS MAIL NO. EV530950396US Effective on 12/08/2004. Complete if Known pursuant to the Consolidated Appropriations Act. 2005 (H.R. 4818). 10/614,279 **Application Number** FEE TRANSMITTAL July 7, 2003 Filing Date First Named Inventor Serge F. Fruhauf for FY 2005 **Examiner Name** Diane I. Lee Applicant claims small entity status. See 37 CFR 1.27 Art Unit 2876 TOTAL AMOUNT OF PAYMENT Attorney Docket No. 02-S-104 (850063.599) METHOD OF PAYMENT (check all that apply) Check Credit Card ☐ Money Order Other (please identify): 冈 Deposit Account Number: 19-1090 Deposit Account Name: Seed IP Law Group PLLC Deposit Account For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any underpayments or credit any overpayments Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 Warning: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **EXAMINATION FILING FEES** SEARCH FEES **FEES Small Small Entity Small Entity Entity Application Type** Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fees Paid (\$) 300 500 250 200 100 Utility 150 200 100 100 50 130 65 Design 0 0 0 0 Provisional 200 100 2. EXCESS CLAIM FEES **Small Entity** Fee (\$) **Fee Description** Fee (\$) Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 200 100 Multiple dependent claims 360 180 **Total Claims** Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims -27 or HP = 43 16 Х 50 800 Fee Paid (\$) Fee (\$) HP = highest number of total claims paid for, if greater than 20 Indep. Claims **Extra Claims** Fee Paid (\$) Fee (\$) -5 or HP = 200 12 7 Х <u>1400</u> HP = highest number of independent claims paid for, if greater than 3 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)) the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof			e (\$)	Fee Paid (\$)
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4. OTHER FEE(S)						Fees Paid (\$)
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Other (e.g., late filin	g surcharge):					
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SUBMITTED BY	A u	Λ	, , , , , , , , , , , , , , , , , , , ,			
Signature	Deni/Ud	Registration No. (Attorney/Agent)	41,702	Telephone	206-6	622-4900
Name (Print/Type)	Dennis M. de Guzm	an /		Date	June	13, 2005